Case 1:17-bk-11081 Doc 1 Filed 06/27/17 Entered 06/27/17 15:26:17 Desc Main Document Page 1 of 52

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF RHODE ISLAND	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	 eck if this an ended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	e the name that is on government-issued are identification (for	Susan First name	First name
	exar	nple, your driver's	В.	
		se or passport).	Middle name	Middle name
		g your picture tification to your	Ferri	
		ting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	the last 4 digits of Social Security ober or federal vidual Taxpayer tification number	xxx-xx-3811	

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Case number (if known)

Debtor 1 Susan B. Ferri

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	64 Wilcox Avenue	If Debtor 2 lives at a different address:			
		Pawtucket, RI 02860 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Providence				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Susan B. Ferri

ar	t 2: Tell the Court About	our B	Bankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropria	y 11 U.S.C. § 342(b) for Individuals Fi ate box.	ling for Bankruptcy
	choosing to file under	■ C	hapter 7				
		□с	hapter 11				
		□с	hapter 12				
		□с	hapter 13				
			•				
3.	How you will pay the fee		about how yo	ou may pay. Typi attorney is subm	cally, if you are paying the fee y	eck with the clerk's office in your local yourself, you may pay with cash, cash half, your attorney may pay with a cre	ier's check, or money
					allments. If you choose this opto (Official Form 103A).	tion, sign and attach the Application for	or Individuals to Pay
			I request tha	t my fee be wai	ved (You may request this opti-	on only if you are filing for Chapter 7.	
			applies to you	ur family size and	d you are unable to pay the fee	your income is less than 150% of the or in installments). If you choose this op ficial Form 103B) and file it with your p	tion, you must fill out
).	Have you filed for bankruptcy within the last 8 years?	■ No					
	lust o yours.	<u></u>	District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No	0				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y€	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	ı
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	□ No	o. Go to I	ine 12.			
	residence :	■ Ye	es. Has yo	our landlord obtai	ned an eviction judgment agair	nst you and do you want to stay in you	r residence?
				No. Go to line 1	2.		
			_	Yes. Fill out <i>Init</i> bankruptcy peti		n Judgment Against You (Form 101A)	and file it with this

Page 4 of 52 Case number (if known) Debtor 1 Susan B. Ferri

Part	Report About Any Bu	sinesses	You Own	n as a Sole Proprietor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Go to Part 4.				
		☐ Yes.	Name	Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State & ZIP Code				
	it to this petition.		Check	k the appropriate box to describe your business:				
				Health Care Business (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				Commodity Broker (as defined in 11 U.S.C. § 101(6))				
				None of the above				
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, in 11 U.S.C. 1116(1)(B).				der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ndicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B).				
	debtor?	No.	I am r	not filing under Chapter 11.				
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankru Code.					
		☐ Yes.	I am f	filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Pari	4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?				
	public health or safety? Or do you own any property that needs			diate attention is				
	immediate attention?		needed,	, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
				Number, Street, City, State & Zip Code				
	•							

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Debtor 1 Susan B. Ferri

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Susan B. Ferri	K IIOOI	Docume	nt Page 6 of 52	mber (if known)		
		ions for Bond	orting Burnooc				
Par	Answer These Questi What kind of debts do	-		neumar dahte? Canaumar dahta ara	defined in 11 LLS C. S. 101/0) on "incurred by on		
10.	you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) individual primarily for a personal, family, or household purpose."				
			No. Go to line 16b.				
			Yes. Go to line 17.				
			re your debts primarily bu oney for a business or inves	bts that you incurred to obtain business or investment.			
			No. Go to line 16c.	• • • • • • • • • • • • • • • • • • •			
			Yes. Go to line 17.				
		16c. St	ate the type of debts you ov	we that are not consumer debts or bus	iness debts		
17.	Are you filing under Chapter 7?	□ No. I a	am not filing under Chapter	7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will			o you estimate that after any exempt pailable to distribute to unsecured credit	property is excluded and administrative expenses ors?		
			No				
	be available for distribution to unsecured creditors?		l Yes				
18.	How many Creditors do you estimate that you owe?	1 -49		□ 1,000-5,000	□ 25,001-50,000		
		□ 50-99		☐ 5001-10,000 ☐ 40,004.05.000	□ 50,001-100,000		
		☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000		
19.	How much do you	□ \$0 - \$50,0	000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	\$50,001 -		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$50,0	000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	\$50,001		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
	to be:	\$100,001		□ \$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion		
		□ \$500,001	□ \$100,000,001 - \$500 million □ More than \$50 billion				
Par	:7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
			ve chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, d States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		bankruptcy of and 3571.	case can result in fines up to		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519		
		/s/ Susan I Susan B. I Signature of	Ferri	Signature of De	ebtor 2		
		Executed on		Executed on			
			MM / DD / YYYY		MM / DD / YYYY		

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Debtor 1 Susan B. Ferri Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christopher M. Lefebvre, Esq.	Date	June 27, 2017				
Signature of Attorney for Debtor		MM / DD / YYYY				
Christopher M. Lefebvre, Esq.						
Law Offices of Christopher M. Lefebvre						
P.O. Box 479						
Pawtucket, RI 02862						
Number, Street, City, State & ZIP Code						
Contact phone (401) 728-6060	Email address	chris@lefebvrelaw.com				
RI #4019						
Bar number & State						

		Document	Page 8 of 52	
Fill in this informa	ation to identify your	case:		
Debtor 1	Susan B. Ferri			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	DISTRICT OF RHODE ISLAND)	
Case number				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	300,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	28,579.35
	1c. Copy line 63, Total of all property on Schedule A/B	\$	328,579.35
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	302,534.18
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	6,253.08
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	35,993.95
	Your total liabilities	\$	344,781.21
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,535.09
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,580.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Susan B. Ferri

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14.

4,298.42

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
From Fait 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	6,253.08
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	6,253.08

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Fill ir	n this information t	o identify	your case and th			1 71010					
Debte	or 1 Sus	an B. Fe	erri								
D = h 4	First N	lame	Middle	Name		Last Nam	ne				
Debto Spous	or 2 se, if filing) First N	lame	Middle	Name		Last Nam	ne				
Jnite	d States Bankruptcy	Court for	the: DISTRICT	OF RHO	ODE ISLAND						
Caca	number										haal Maka ka sa
Jase						_					heck if this is an mended filing
SC n eacl nink i	cial Form 1 hedule A/ n category, separately t fits best. Be as com ation. If more space is er every question.	B: PI	roperty lescribe items. List a	e. If two	married people	e are filin	g together, both a	re equally res	oonsible for su	pplying	correct
Part 1	: Describe Each Re	sidence, B	uilding, Land, or Otl	ner Real	Estate You Ov	vn or Hav	e an Interest In				
Do	you own or have any	legal or eq	quitable interest in a	ny resid	lence, building	, land, or	similar property?				
	No. Go to Part 2.										
_	Yes. Where is the prop	ertv?									
1.1	674 East Washin	gton Str	reet	What	t is the property	-	ll that apply	Do not de	duct secured cl	aims or e	exemptions. Put
	Street address, if available	, or other des	scription		Duplex or multiple Condominium Manufactured	or coopei	rative				on Schedule D: red by Property.
	North Attleboro	MA	02760-0000			or mobile	nome	Current v	alue of the perty?		nt value of the on you own?
_	City	State	ZIP Code		Investment pr	operty		=	00,000.00		\$300,000.00
					Timeshare						ership interest
				_	Other has an interest	t in the pr	operty? Check one		fee simple, ten te), if known.	ancy by	the entireties, or
							., .,				
_	Bristol				20010. 2 0,						
	County				200101 1 4114		•		k if this is con	nmunity	property
				Otho			ors and another	`	nstructions)		
					erty identificati		o add about this i er:	tem, such as i	ocai		
2. A	dd the dollar value	of the no	ortion you own fo	r all of	vour entries	from Par	t 1. including a	nv entries fo	,		
	ages you have atta										300,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Case number (if known) Document Debtor 1 Susan B. Ferri 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Kia Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Rio Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2013 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$8,000.00 \$8,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$8,000.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Household goods \$4,000.00 Location: 64 Wilcox Avenue, Pawtucket RI 02860 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... television \$200.00 Location: 64 Wilcox Avenue, Pawtucket RI 02860 computer and printer \$500.00 Location: 64 Wilcox Avenue, Pawtucket RI 02860 cell phone \$500.00 Location: 64 Wilcox Avenue, Pawtucket RI 02860 8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

☐ Yes. Describe.....

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Case number (if known) Document Debtor 1 Susan B. Ferri 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Wearing Apparel \$100.00 Location: 64 Wilcox Avenue, Pawtucket RI 02860 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No ■ Yes. Describe..... \$200.00 Location: 64 Wilcox Avenue, Pawtucket RI 02860 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... dog \$50.00 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5,550.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No

Cash Location: 64 Wilcox Avenue, Pawtucket RI 02860

\$300.00

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Case number (if known) Document Debtor 1 Susan B. Ferri

	ng, savings, o		counts; certificates of deposit; shares in credit unions, brokerage houses, and others with the same institution, list each.	er similar
□ No ■ Yes	·	vo manipio account	Institution name:	
■ Yes	•••			
	17.1.	checking	Sharon Credit Union	\$500.00
		_		4
	17.2.	savings	Sharon Credit Union	\$5.00
	17.3.	savings	Sharon Credit Union (Debtors son account)	\$30.00
	17.4.	savings	Sharon Credit Union (Debtors son's account)	\$30.00
18. Bonds, mutual fur Examples: Bond fu ■ No			rokerage firms, money market accounts	
☐ Yes		Institution or issue	r name:	
19. Non-publicly trade joint venture■ No□ Yes. Give specif	fic information		porated and unincorporated businesses, including an interest in an LLC, pa % of ownership:	rtnership, and
Negotiable instrum	<i>nent</i> s include p	personal checks, ca	potiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
☐ Yes. Give specifi		about them uer name:		
21. Retirement or pen <i>Examples:</i> Interest ☐ No			403(b), thrift savings accounts, or other pension or profit-sharing plans	
Yes. List each ac	•	ely. of account:	Institution name:	
	401K		Franklin Templeton Investments	\$14,164.35
Examples: Agreen	nused deposit	s you have made s	so that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications companies, or others	
■ No □ Yes			Institution name or individual:	
_ `	act for a perio	dic payment of mor	ney to you, either for life or for a number of years)	
■ No □ Yes	Issuer nam	e and description.		
26 U.S.C. §§ 530(b)			qualified ABLE program, or under a qualified state tuition program.	
■ No □ Yes	Institution r	name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	

D	ebtor 1	Susan B. Ferri	Case number (if known)	
25	■ No	equitable or future interests in property (other than anything listed in line 1), Give specific information about them	and rights or powers exercisa	ble for your benefit
26	. Patents	s, copyrights, trademarks, trade secrets, and other intellectual property ples: Internet domain names, websites, proceeds from royalties and licensing agree	ments	
	_	Give specific information about them		
27		es, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative association holdings, liquor li	censes, professional licenses	
	☐ Yes.	Give specific information about them		
M	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax ref	unds owed to you		
	■ No □ Yes. 0	Give specific information about them, including whether you already filed the return	s and the tax years	
29	■ No	support oles: Past due or lump sum alimony, spousal support, child support, maintenance, c Give specific information	livorce settlement, property settle	ement
30	Examp ■ No	amounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits, sick pay, vac- benefits; unpaid loans you made to someone else Give specific information	ation pay, workers' compensatio	on, Social Security
31		ts in insurance policies oles: Health, disability, or life insurance; health savings account (HSA); credit, home	eowner's, or renter's insurance	
	_	Name the insurance company of each policy and list its value. Company name: Benef	ficiary:	Surrender or refund value:
32	If you a	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or ne has died.	are currently entitled to receive p	property because
	☐ Yes.	Give specific information		
33		against third parties, whether or not you have filed a lawsuit or made a dema les: Accidents, employment disputes, insurance claims, or rights to sue	and for payment	
	☐ Yes.	Describe each claim		
34	■ No	contingent and unliquidated claims of every nature, including counterclaims of Describe each claim	of the debtor and rights to set	off claims
35	-	ancial assets you did not already list		
	■ No □ Yes.	Give specific information		

Document

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Case number (if known) Document Debtor 1 Susan B. Ferri Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$15,029.35 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$300,000.00 Part 2: Total vehicles, line 5 \$8,000.00 57. Part 3: Total personal and household items, line 15 \$5,550.00 Part 4: Total financial assets, line 36 \$15,029.35 Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00

\$28,579.35

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

\$328,579.35

\$28,579.35

Official Form 106A/B Schedule A/B: Property page 6

		17/1/11111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Susan B. Ferri			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE	SLAND	
Case number (if known)				☐ Check if this is an amended filing
				amended filling

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	/ the Pro	perty Yοι	ı Claim a	s Exempt
---------	----------	-----------	-----------	-----------	----------

		· · · · · · · · · · · · · · · · · · ·						
1.	Which set of exemptions are you claiming	ur spouse is filing with you.						
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	■ You are claiming federal exemptions. 11 l	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	674 East Washington Street North Attleboro, MA 02760 Bristol County	\$300,000.00		\$0.00	11 U.S.C. § 522(d)(1)			
	Line from Schedule A/B: 1.1		☐ 100% of fair market value, up to any applicable statutory limit					
	2013 Kia Rio Line from Schedule A/B: 3.1	\$8,000.00		\$3,775.00	11 U.S.C. § 522(d)(2)			
	Ellie Holli Genedale A.D. G.1			100% of fair market value, up to any applicable statutory limit				
	2013 Kia Rio Line from Schedule A/B: 3.1	\$8,000.00		\$4,225.00	11 U.S.C. § 522(d)(5)			
	Ellio II oli I oli I oli			100% of fair market value, up to any applicable statutory limit				

television

Household goods

Pawtucket RI 02860

Pawtucket RI 02860

Line from Schedule A/B: 7.1

Line from Schedule A/B: 6.1

Location: 64 Wilcox Avenue,

Location: 64 Wilcox Avenue,

\$4,000.00

\$200.00

11 U.S.C. § 522(d)(3)

11 U.S.C. § 522(d)(3)

\$4,000.00

\$200.00

100% of fair market value, up to

100% of fair market value, up to any applicable statutory limit

any applicable statutory limit

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Case number (if known) Debtor 1 Susan B. Ferri Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B computer and printer 11 U.S.C. § 522(d)(5) \$500.00 \$500.00 Location: 64 Wilcox Avenue, П Pawtucket RI 02860 100% of fair market value, up to Line from Schedule A/B: 7.2 any applicable statutory limit cell phone 11 U.S.C. § 522(d)(5) \$500.00 \$500.00 Location: 64 Wilcox Avenue, Pawtucket RI 02860 100% of fair market value, up to Line from Schedule A/B: 7.3 any applicable statutory limit Wearing Apparel Wearing apparel 11 USC \$100.00 \$100.00 Location: 64 Wilcox Avenue, 522(d)(3) Pawtucket RI 02860 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 11.1 **iewelry** 11 U.S.C. § 522(d)(4) \$200.00 \$200.00 Location: 64 Wilcox Avenue, Pawtucket RI 02860 100% of fair market value, up to Line from Schedule A/B: 12.1 any applicable statutory limit 11 U.S.C. § 522(d)(5) dog \$50.00 \$50.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Cash 11 U.S.C. § 522(d)(5) \$300.00 \$300.00 Location: 64 Wilcox Avenue, Pawtucket RI 02860 100% of fair market value, up to Line from Schedule A/B: 16.1 any applicable statutory limit checking: Sharon Credit Union 11 U.S.C. § 522(d)(5) \$500.00 \$500.00 Line from Schedule A/B: 17.1 П 100% of fair market value, up to any applicable statutory limit savings: Sharon Credit Union 11 U.S.C. § 522(d)(5) \$5.00 \$5.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit savings: Sharon Credit Union 11 U.S.C. § 522(d)(5) \$30.00 \$30.00 (Debtors son account) Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit savings: Sharon Credit Union 11 U.S.C. § 522(d)(5) \$30.00 \$30.00 (Debtors son's account) Line from Schedule A/B: 17.4 100% of fair market value, up to any applicable statutory limit 401K: Franklin Templeton 11 U.S.C. § 522(d)(10)(E) \$14,164.35 \$14,164.35 Investments Line from Schedule A/B: 21.1 100% of fair market value, up to

any applicable statutory limit

Filed 06/27/17 Entered 06/27/17 15:26:17 Desc Main Document Page 18 of 52 Debtor 1 Susan B. Ferri Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Case 1:17-bk-11081

Yes

Doc 1

Case 1.17-bk-110		age 19 c	30 00/27/17 1: of 52	5.26.17 Desi	UMain
Fill in this information to identify		10E 1.9 C	11 . 17		
Debtor 1 Susan B. Fer		st Name			
Debtor 2					
(Spouse if, filing) First Name	Middle Name Las	st Name			
United States Bankruptcy Court for	the: DISTRICT OF RHODE ISLAND				
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
Official Form 106D					
Official Form 106D					
Schedule D: Credito	rs Who Have Claims Se	cured	by Property	<u>/</u>	12/15
	ole. If two married people are filing together, b				
s needed, copy the Additional Page, fil number (if known).	ll it out, number the entries, and attach it to th	is form. On th	ne top of any addition	al pages, write your na	me and case
. Do any creditors have claims secure	d by your property?				
☐ No. Check this box and subm	nit this form to the court with your other scho	edules. You	have nothing else to	report on this form.	
Yes. Fill in all of the informati	on below.				
Part 1: List All Secured Claims					
	nas more than one secured claim, list the creditor	congrately	Column A	Column B	Column C
for each claim. If more than one creditor	has a particular claim, list the other creditors in P betical order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
Wells Fargo Home Mortage	Describe the property that secures the c	laim:	\$302,534.18	\$300,000.00	\$2,534.18
Creditor's Name	674 East Washington Street No	rth			
	Attleboro, MA 02760 Bristol Co	unty			
PO Box 10368	As of the date you file, the claim is: Check	k all that			
Des Moines, IA 50306-0368	apply.				
	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only	■ An agreement you made (such as morto	nage or secure	ad		
Debtor 2 only	car loan)	Jage of Secure	şu .		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechani	ic's lien)			
At least one of the debtors and anoth					
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number	8496			
Add the dollar value of your entries	in Column A on this page. Write that number h	nere.	\$302,534	1 18	
-	in Column A on this page. Write that number radd the dollar value totals from all pages.	ici C.			
Write that number here:			\$302,534	4.18	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

_				Document	Page	20 ot !	5/		
Fill	in this inform	ation to identify your	case:						
Det	otor 1	Susan B. Ferri							
		First Name	Middle	e Name	Last Name)			
	otor 2 use if, filing)	First Name	Middle	e Name	Last Name	·			
Unit	ted States Ban	kruptcy Court for the:	DISTRIC	T OF RHODE ISLAND					
Cas	se number								
(if kn	own)							_	if this is an
								amend	ed filing
Off	icial Form	106F/F							
		/F: Creditors W	/ho Hav	e Unsecured (Claim	8			12/15
ny e Sche Sche eft. <i>I</i> name	executory contri- edule G: Execute edule D: Credito Attach the Contri- e and case num	accurate as possible. Us acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sect inuation Page to this pag ber (if known). of Your PRIORITY Un	that could re pired Leases ured by Prop ge. If you hav	esult in a claim. Also lis (Official Form 106G). Do perty. If more space is no e no information to repo	t executo not inclu eeded, co	ry contract de any cre py the Part	ts on Schedule A/B: I editors with partially s t you need, fill it out,	Property (Official For secured claims that a number the entries in	m 106A/B) and on re listed in the boxes on the
		s have priority unsecure							
	No. Go to Pa		u ciaiilis aga	iiiist you :					
	Yes.	u (
2.	List all of your identify what type possible, list the	priority unsecured claims e of claim it is. If a claim ha claims in alphabetical orden nan one creditor holds a pa	as both priority er according to	y and nonpriority amounts o the creditor's name. If yo	, list that o	laim here a	and show both priority a	and nonpriority amount	s. As much as
		tion of each type of claim, s				hooklet)			
	(i oi aii explanat	non or each type of claim, a			nstruction	bookiet.)	Total claim	Priority	Nonpriority
2.1	IRS			Last 4 digits of account	numbor	6250	\$6,053.08	amount \$6,053.08	amount \$0.00
2.1	J	ditor's Name		Last 4 digits of account	number	0339		<u>Ψ0,053.06</u>	\$0.00
	PO Box : Fresno,	24017 CA 93779-4017		When was the debt inco	urred?	2014		-	
		reet City State Zlp Code		As of the date you file,	the claim	is: Check a	all that apply		
	_	the debt? Check one.		☐ Contingent					
	☐ Debtor 1 or	•		☐ Unliquidated					
	Debtor 2 or	,		☐ Disputed					
	Debtor 1 ar	nd Debtor 2 only		Type of PRIORITY unse		im:			
	At least one	e of the debtors and anothe	er	☐ Domestic support obli	igations				
	☐ Check if th	is claim is for a commur	nity debt	Taxes and certain oth	er debts y	ou owe the	government		
	Is the claim su	ubject to offset?		☐ Claims for death or pe	ersonal inj	ury while yo	ou were intoxicated		
	■ No			Other. Specify					
	☐ Yes			Fed	leral tax	(
2.2		Walpole		Last 4 digits of account	t number		\$200.00	\$0.00	\$200.00
	135 Sch	ditor's Name ool Street , MA 02081		When was the debt inco	urred?	2014		-	
	Number Str	reet City State Zlp Code		As of the date you file,	the claim	is: Check a	all that apply		
	Who incurred	the debt? Check one.		☐ Contingent					
	Debtor 1 or	nly		☐ Unliquidated					
	Debtor 2 or	nly		☐ Disputed					
	_	nd Debtor 2 only		Type of PRIORITY unse	cured cla	im:			
	_	e of the debtors and anothe	er	☐ Domestic support obli	igations				
		is claim is for a commur		■ Taxes and certain oth	•	OU OWE tho	o dovernment		
		is claim is for a commur ubject to offset?	mry dept	☐ Claims for death or pe	-		=		
	No	,		☐ Other. Specify		y yc	Ju Toro intoxidated		
	☐ Yes				taxes				

Page 21 of 52 Case number (if know) Document Debtor 1 Susan B. Ferri Part 2: List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims	s against you?		
	☐ No. You have nothing to report in this part. Submit t	his form to the court with your other sche	dules.	
	■ Yes.			
4.	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2.	aim. For each claim listed, identify what ty	pe of claim it is. Do not list claims already inc	luded in Part 1. If more
	_			Total claim
4.1	Time to the same and the same a	Last 4 digits of account number	2000	\$364.00
	Nonpriority Creditor's Name PO Box 1022 Wixom, MI 48393-1022	When was the debt incurred?	2010-present	-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify credit card	purchases	-
4.2		Last 4 digits of account number	1539	\$1,146.23
	Nonpriority Creditor's Name PO Box 30285	When was the debt incurred?	2010-present	
	Salt Lake City, UT 84130-0285	when was the dest incurred.	2010-present	-
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	<u> </u>	report as priority claims Debts to pension or profit-sharing	a plane, and other similar debte	
	■ No	' '	,	
	☐ Yes	■ Other. Specify credit card	purcnases	

Debte	or 1 Susan B. Ferri	Document Page 2.	Z 0T 5Z Case number (if know)	
4.3	Capital One, N.A.	Last 4 digits of account number	2490	\$4,510.28
	Nonpriority Creditor's Name PO Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	2010-present	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify credit card	purchases	
4.4	Capital One, N.A.	Last 4 digits of account number	3151	\$3,540.45
	Nonpriority Creditor's Name PO Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	2010-present	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify credit card	purchases	
4.5	Chase Card Services	Last 4 digits of account number	0902	\$566.43
	Nonpriority Creditor's Name PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	2010-present	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	

☐ Yes

■ Other. Specify credit card purchases

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Debt	or 1 Susan B. Ferri		Case number (if know)			
4.6	Chase Card Services	Last 4 digits of account number	6788	\$14,000.00		
	Nonpriority Creditor's Name PO Box 15298	When was the debt incurred?	2010			
	Wilmington, DE 19850					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts			
	Yes	■ Other. Specify credit card	purchases			
4.7	Comenity-Loft	Last 4 digits of account number	1668	\$141.38		
	Nonpriority Creditor's Name Bankruptcy Department	When was the debt incurred?	2010-present			
	PO Box 182125		2010 procent			
	Columbus, OH 43218-2125	_				
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	and and all an aimiles debte			
	■ No	·				
	☐ Yes	Other. Specify credit card	purchases			
4.8	Comenity-Victoria's Secret	Last 4 digits of account number	4309	\$565.74		
	Nonpriority Creditor's Name Bankruptcy Department	When was the debt incurred?	2010-present			
	PO Box 182125	When was the debt incurred?	2010-present			
	Columbus, OH 43218					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated ☐ Disputed				
	Debtor 1 and Debtor 2 only					
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts			
	□ Yes	■ Other. Specify credit card				
	□ 162	Other. Specify	Purvilases			

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Debtor	Susan B. Ferri		Case number (if know)	
4.9	Discover	Last 4 digits of account number	7902	\$2,724.17
	Nonpriority Creditor's Name Customer Service PO Box 30943	When was the debt incurred?	2010-present	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify credit card	purchases	
4.1	Men's Wearhouse/Syncb	Last 4 digits of account number	7798	\$875.33
	Nonpriority Creditor's Name PO Box 965004 Orlando, FL 32896	When was the debt incurred?	2010-present	
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify credit card	purchases	
4.1	Target Credit Services	Last 4 digits of account number	8847	\$7,559.94
	Nonpriority Creditor's Name PO Box 1581 Minneapolis, MN 55440	When was the debt incurred?	2010-present	
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify credit card	purchases	
			<u>-</u>	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Susan B. Ferri

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 6,253.08
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 6,253.08
	۰,		0.1	Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 35,993.95
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 35,993.95

Fill in this infor	mation to identify your	case:		
Debtor 1	Susan B. Ferri			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE	SLAND	
Case number				
(if known)				☐ Check if this amended filir

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5	*				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

		Document	Page 27 of 52	
Fill in thi	s information to identify your	case:		
Debtor 1	Susan B. Ferri			
20210	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, f	iling) First Name	Middle Name	Last Name	
United St	tates Bankruptcy Court for the:	DISTRICT OF RHODE ISLA	ND	
Case nur	mher			
(if known)				☐ Check if this is an amended filing
⊃ffi⊲i∂	ol Form 106U			
	al Form 106H	1.4		
Sche	dule H: Your Cod	ebtors		12/15
eople ar ill it out, our nam	e filing together, both are equ and number the entries in the e and case number (if known)	ally responsible for supplying boxes on the left. Attach the . Answer every question.	ou may have. Be as complete and ac g correct information. If more space Additional Page to this page. On the ot list either spouse as a codebtor.	is needed, copy the Additional Page,
■ Ye				
- 10	55			
			rty state or territory? (Community pro Rico, Texas, Washington, and Wiscon	
■ No	o. Go to line 3.			
	es. Did your spouse, former spou	use, or legal equivalent live with	you at the time?	
	on Dia your opouce, remier oper	acc, or logar equitations are inte	, , , , , , , , , , , , , , , , , , , ,	
in lin Form	ne 2 again as a codebtor only i	f that person is a guarantor o	or cosigner. Make sure you have liste	filing with you. List the person shown ed the creditor on Schedule D (Officia e D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		e creditor to whom you owe the debt edules that apply:
3.1	Anthony P. Ferri		Cohodulo	D line 24
0.1	674 East Washington Stre	et		D, line 2.1 E/F, line
	North Attleboro, MA 0276		☐ Schedule	
				Home Mortage
3.2	Anthony P. Ferri		☐ Schedule	D, line
	674 East Washington Stre			E/F, line 4.1
	North Attleboro, MA 0276	0	☐ Schedule	
			American Ex	
2.2	Anthony B. Forri		E Och call	Dina
3.3	Anthony P. Ferri 674 East Washington Stre	et	☐ Schedule	
	North Attleboro, MA 0276			E/F, line 4.2
	,		☐ Schedule Capital One,	
			Capital One,	14.7.

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Debtor 1 Susan B. Ferri Case number (if known)

	Column 1: Your codebtor	
	Column 1. Tour codestor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	Anthony P. Ferri	☐ Schedule D, line
	674 East Washington Street	■ Schedule E/F, line 4.3
	North Attleboro, MA 02760	☐ Schedule G
		Capital One, N.A.
3.5	Anthony P. Ferri	☐ Schedule D, line
	674 East Washington Street	■ Schedule E/F, line 4.4
	North Attleboro, MA 02760	☐ Schedule G
		Capital One, N.A.
3.6	Anthony P. Ferri	☐ Schedule D, line
	674 East Washington Street	■ Schedule E/F, line 4.5
	North Attleboro, MA 02760	☐ Schedule G
		Chase Card Services
3.7	Anthony P. Ferri	☐ Schedule D, line
•	674 East Washington Street	■ Schedule E/F, line 4.6
	North Attleboro, MA 02760	☐ Schedule G
		Chase Card Services
3.8	Anthony P. Ferri	☐ Schedule D, line
0.0	674 East Washington Street	Schedule E/F, line 4.7
	North Attleboro, MA 02760	☐ Schedule G
		Comenity-Loft
3.0	Anthony P. Ferri	☐ Schedule D, line
0.0	674 East Washington Street	■ Schedule E/F, line 4.8
	North Attleboro, MA 02760	☐ Schedule G
		Comenity-Victoria's Secret
3 10	Anthony P. Ferri	□ Schodulo D. lino
3.10	674 East Washington Street	□ Schedule D, line ■ Schedule E/F, line 4.9
	North Attleboro, MA 02760	□ Schedule G
		Discover

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Debtor 1	Susan B. Ferri	Case number (if known)
	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.11	Anthony P. Ferri 674 East Washington Street North Attleboro, MA 02760	☐ Schedule D, line ■ Schedule E/F, line ☐ Schedule G Men's Wearhouse/Syncb
3.12	Anthony P. Ferri 674 East Washington Street North Attleboro, MA 02760	☐ Schedule D, line ■ Schedule E/F, line4.11 ☐ Schedule G Target Credit Services

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	in this information to	identify your ca									
	btor 2 buse, if filing)					_					
	•	cv Court for the	: DISTRICT OF RHOD	E ISLAND							
Cas	se number						Check if		d filina		
							☐ A su	ppleme	nt showing	postpetition owing date:	chapter
<u>O</u>	fficial Form	<u> 1061</u>					MM /	/ DD/ Y	YYY		
S	chedule I: \	our Inco	ome								12/15
sup spo atta	plying correct infor use. If you are sepa ch a separate shee	mation. If you rated and you	sible. If two married peo are married and not fili r spouse is not filing w On the top of any additi	ng jointly, and your s ith you, do not includ	pouse le infor	is liv matio	ing with you	u, inclu ur spo	ide informa use. If mor	ation about e space is r	your needed,
1.	Fill in your emplo information.	yment		Debtor 1			De	ebtor 2	or non-filiı	ng spouse	
	If you have more th		Employment status	■ Employed				E mplo	yed		
	attach a separate printermation about a	0	Employment status	☐ Not employed				Not en	nployed		
	employers.		Occupation	Receptionist							
	Include part-time, s self-employed work		Employer's name	MIAA							
	Occupation may in or homemaker, if it		Employer's address	33 Forge Parkwa Franklin, MA 020							
			How long employed t	here? 2 1/2 ye	ars			_			
Pai	rt 2: Give Deta	ails About Mor	thly Income								
	mate monthly inco		ate you file this form. If	you have nothing to re	port for	any I	line, write \$0) in the	space. Inclu	ıde your nor	n-filing
	ou or your non-filing s e space, attach a sep		ore than one employer, co	ombine the information	for all	emplo	oyers for tha	t persor	n on the line	es below. If y	you need
							For Debtor	r 1	For Debt	or 2 or g spouse	
2.			ry, and commissions (be calculate what the monthle		2.	\$	3,11	8.35	\$	0.00	
3.	Estimate and list	monthly overti	me pay.		3.	+\$		0.00	+\$	0.00	

3,118.35

\$

0.00

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Susan B. Ferri		Cas	se number (if known)				
				F	or Debtor 1		ebtor 2		
	Сор	y line 4 here	4.	\$	3,118.35	\$	9 -1	0.00	
5.	Liet	all payroll deductions:							
Э.			F.o.	\$	C4C 02	¢		0.00	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$	646.92 0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		0.00	
	5e.	Insurance	5e.	\$	0.00	\$		0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$		0.00	
	5g.	Union dues	5g.	\$	0.00	\$		0.00	
	5h.	Other deductions. Specify: 125FSA	5h.+	\$	86.67	+ \$		0.00	
		pens		\$	149.67	\$		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	883.26	\$		0.00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,235.09	\$		0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	1,300.00	\$		0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$		0.00	
	8e.	Social Security	8e.	\$	0.00	\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f.	\$	0.00	\$ 		0.00	
	8g. 8h.	Other monthly income. Specify:	8g. 8h.+		0.00	· <u> </u>		0.00	
	OII.	Cuter monthly income. Opeciny.	_ ''''	Ψ.	0.00	' —		0.00	7
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,300.00	\$		0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,535.09 + \$		0.00	= \$	3,535.09
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•		hedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies					12.	\$	3,535.09
13.	Do y	you expect an increase or decrease within the year after you file this form? No.	?					Combin monthly	ea / income
	_	Ves Evolain:							

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Fill	in this informa	tion to identify yo	our case:			1		
	otor 1	Susan B. Fe				Che	ck if this is:	
	_	Ousan B. 1 C					An amended filing	
	otor 2 ouse, if filing)							wing postpetition chapter the following date:
Unit	ted States Bankr	uptcy Court for the	: DISTRI	CT OF RHODE ISLAND			MM / DD / YYYY	
Cas	se number							
	nown)							
0	fficial Fo	rm 106J				•		
		J: Your	Exper	nses				12/1
Be	as complete a	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to □ Yes. Doe		in a separ	ate household?				
	□N		•					
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			son		11 years	■ Yes
					son		11 years	□ No ■ Yes
								□ No
								Yes
								□ No □ Yes
3.	Do your exp	enses include		No				⊔ Yes
		f people other t d your depende	han $_{f \Box}$	Yes				
Est	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of sucl ficial Form 10		d have inc	cluded it on Schedule I: \	our Income		Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgag	e 4. S	\$	1,800.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. S	\$	0.00
	•	rty, homeowner's				4b. \$	<u> </u>	0.00
		maintenance, re owner's associa		upkeep expenses		4c. 3		0.00
5.				our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00

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Debtor 1 Susan B. Ferri		Case num	ber (if known)	
5. Utilities:				
6a. Electricity, heat, natural g	as	6a.	\$	200.00
6b. Water, sewer, garbage co		6b.	\$	0.00
	ternet, satellite, and cable services	6c.	\$	205.00
6d. Other. Specify:	,	6d.	\$	0.00
Food and housekeeping supp	olies	7.	\$	525.00
Childcare and children's educ		8.	\$	0.00
Clothing, laundry, and dry cle	aning	9.	\$	75.00
D. Personal care products and s	=	10.	\$	50.00
Medical and dental expenses		11.	\$	50.00
Transportation. Include gas, m	naintenance, bus or train fare.		·	
Do not include car payments.		12.	\$	150.00
	ion, newspapers, magazines, and books	13.	\$	100.00
. Charitable contributions and	religious donations	14.	\$	0.00
. Insurance.				
	eted from your pay or included in lines 4 or 20.	45-	¢.	
15a. Life insurance		15a.	·	0.00
15b. Health insurance		15b.	·	0.00
15c. Vehicle insurance		15c.	·	0.00
15d. Other insurance. Specify:	dusted from your pay on included in Page 4 and 00	15d.	\$	0.00
 Taxes. Do not include taxes de Specify: 	ducted from your pay or included in lines 4 or 20.	16.	\$	0.00
. Installment or lease payments	ş:		Ψ	0.00
17a. Car payments for Vehicle		17a.	\$	0.00
17b. Car payments for Vehicle		17b.	·	0.00
17c. Other. Specify:		17c.	\$	0.00
17d. Other. Specify:		17d.	*	0.00
	aintenance, and support that you did not report a		·	
deducted from your pay on lii	ne 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
Other payments you make to	support others who do not live with you.		\$	0.00
Specify:		19.		
	not included in lines 4 or 5 of this form or on Sci			
20a. Mortgages on other prope	erty	20a.		0.00
20b. Real estate taxes		20b.	\$	0.00
20c. Property, homeowner's, o		20c.	·	0.00
20d. Maintenance, repair, and		20d.		0.00
20e. Homeowner's association		20e.	\$	0.00
. Other: Specify: car repairs	s, maintenance, registration, car taxes	21.	+\$	50.00
miscellaneous spending n	noney		+\$	100.00
gifts, holidays, birthdays			+\$	45.00
pet care			+\$	50.00
children's school lunches			+\$	100.00
children's tutoring			+\$	80.00
. Calculate your monthly exper	1909			
22a. Add lines 4 through 21.	1363		\$	3 580 00
	enses for Debtor 2), if any, from Official Form 106J-2	,	\$	3,580.00
, , , ,	**		·	
22c. Add line 22a and 22b. The	e result is your monthly expenses.		\$	3,580.00
3. Calculate your monthly net in	come.			
	ined monthly income) from Schedule I.	23a.	\$	3,535.09
23b. Copy your monthly exper	nses from line 22c above.	23b.	-\$	3,580.00
				-,
	penses from your monthly income.		<u></u>	44.04
The result is your month!	y net income.	23c.	\$	-44.91
For example, do you expect to finish modification to the terms of your mo	decrease in your expenses within the year after paying for your car loan within the year or do you expect your tagage?			e or decrease because of a
■ No.				
☐ Yes. Explain here:				

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Debtor 1 Susan B. Ferri First Name Middle Name Last Name Middle Name Last Name First Name Middle Name Last Name First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND Case number (If known) Check if this is an amended filling Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/13 If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Fill in this infor	rmation to identify your	case:			
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND Case number (If known) Check if this is an armended filing Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/19 If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.						
United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND Case number (if known)	Debioi i		Middle Name	Last Name		
United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND Case number (if known)	Debtor 2					
Case number (if known) Check if this is an amended filling Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	(Spouse if, filing)	First Name	Middle Name	Last Name		
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE ISL	AND		
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Case number					
Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	_					
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	· You must file th obtaining mone	is form whenever you fi y or property by fraud in	le bankruptcy schedules or n connection with a bankru	r amended schedules	. Making a false statement, co	
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Sig	ın Below				
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Did you pa	ay or agree to pay some	one who is NOT an attorne	y to help you fill out b	pankruptcy forms?	
Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	■ No					
that they are true and correct.	☐ Yes.	Name of person				
X /s/ Susan R Forri			that I have read the summa	ry and schedules file	d with this declaration and	
79/ Ousail B. Felli	X /s/ Sus	san B. Ferri		X		
Susan B. Ferri Signature of Debtor 2 Signature of Debtor 1				Signature of	Debtor 2	
Date June 27, 2017 Date	_			Date		

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		tion to identify you	r case:			
Debto	or 1	Susan B. Ferri First Name	Middle Name	Last Name		
Debto		First Name	Middle News	Last Name		
` .	e if, filing)	First Name	Middle Name	Last Name		
United	d States Bank	ruptcy Court for the:	DISTRICT OF RHODE IS	SLAND		
Case (if know	number				_	Check if this is an amended filing
Stat		of Financial	Affairs for Individ			4/10
inform	nation. If more er (if known).	re space is needed, . Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup y additional pages, write you	
1. V	/hat is your o	current marital statu	is?			
	Married Not marrie	ed				
2. D	uring the las	t 3 years, have you	lived anywhere other than	where you live now?		
С] No					
	•	all of the places you I	ived in the last 3 years. Do no	ot include where you live now	I.	
I	Debtor 1 Prio	r Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	4 Loomis St North Attlek	treet ooro, MA 02760	From-To: 2005-2016	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	and territories No Yes. Make	s include Arizona, Ca	lifornia, Idaho, Louisiana, Ner nedule H: Your Codebtors (Of	vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
F	ill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
		n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		f current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,112.02	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Document Page 36 of 52
Case number (if known) Debtor 1 Susan B. Ferri

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco	
For last calendar year: (January 1 to December 31, 2016)		■ Wages, commissions, bonuses, tips	\$25,573.71		nissions,
		☐ Operating a business		☐ Operating a b	usiness
For the calendar year before that: (January 1 to December 31, 2015)			\$14,051.49		
		☐ Operating a business		☐ Operating a b	usiness
and other p winnings. If List each so	ublic benefit paymer you are filing a joint		rest; dividends; money collect you received together, list it o	ted from lawsuits; renly once under Deb	
		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			\$4,200.00		
6. Are either I ☐ No. ☐ Yes.	Debtor 1's or Debtor 1 no individual primarily for During the 90 days for During the 90 day	for a personal, family, or household before you filed for bankruptcy, dine 7. The same act creditor to whom you pain at creditor. Do not include payment ude payments to an attorney for the ment on 4/01/19 and every 3 years 2 or both have primarily consubefore you filed for bankruptcy, dine 7. The same act creditor to whom you pain before you filed for bankruptcy and the forms act of the forms are forms.	r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more in ints for domestic support oblighis bankruptcy case. is after that for cases filed on umer debts. id you pay any creditor a total id a total of \$600 or more and	of \$6,425* or more none or more payreations, such as chill or after the date of of \$600 or more?	ments and the total amount you ld support and alimony. Also, do adjustment.
Creditor's	Name and Addres	Dates of payme	ent Total amount	Amount you	Was this payment for

Page 37 of 52 Document ase number (*if known*) Debtor 1 Susan B. Ferri Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Susan B. Ferri vs. Anthony P. Ferri Complaint for **Bristol County Probate and** Pending BR16D1102DR **Divorce Family Court** On appeal 40 Broadway #240 □ Concluded Taunton, MA 02780 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο Yes

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Filed 06/27/17

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Debtor 1 Susan B. Ferri

Pai	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	cy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or contr			
	Gifts or contributions to charities that tota more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	I Describe what you contributed	Dates you contributed	Value
Pai	tt 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptc or gambling?	y or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.			
	how the loss occurred Inc	scribe any insurance coverage for the loss clude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prej	y, did you or anyone else acting on your behalf pay opering a bankruptcy petition? arers, or credit counseling agencies for services require	, , ,	erty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Offices of Christopher M. Lefebvr P.O. Box 479 Pawtucket, RI 02862 chris@lefebvrelaw.com	e Attorney Fees	6/23/2017	\$500.00
17.	Within 1 year before you filed for bankruptc; promised to help you deal with your credito. Do not include any payment or transfer that you No Yes. Fill in the details.		or transfer any prope	erty to anyone who
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Susan B. Ferri

18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details.	usiness or financial affa de as security (such as the	irs? ne granting of a sec		
	Person Who Received Transfer Address	Description and va property transferr		Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you				
	Josh T. Manson and Nicole Vieira 4 Loomis Street North Attleboro, MA 02760	real estate locat Loomis Street, N Attleboro, MA 02	North	In order for sale to take place, the Debtor, Susan Ferri's father paid \$12,180.81.	4/26/2017
19.	 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 				
	Name of trust	Description and va	alue of the proper	ty transferred	Date Transfer was made
Par	List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Stora	ge Units	
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No Yes. Fill in the details.	r other financial accoun iations, and other finan	its; certificates of cial institutions.	deposit; shares in banks, cred	it unions, brokerage
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yeash, or other valuables?	ear before you filed for	bankruptcy, any s	safe deposit box or other depo	sitory for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had according Address (Number, State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit o	r place other than your	home within 1 yea	ar before you filed for bankrup	tcy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h	ad access De	escribe the contents	Do you still have it?
	. , , , , , , , , , , , , , , , , , , ,	Address (Number, State and ZIP Code)	reet, City,		

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Debtor 1 Susan B. Ferri

Pai	t 9: Identify Property You Hold or Control for S	omeone Else			
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any proper	rty yo	ou borrowed from, are storing for	, or hold in trust
	■ No				
	Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value
Pai	t 10: Give Details About Environmental Informa	tion			
For	the purpose of Part 10, the following definitions a	apply:			
-	Environmental law means any federal, state, or leaving substances, wastes, or material into the air regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground	_	•	
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s	-	law,	whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si	nental law defines as a hazardous	s wa	ste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of when	n the	ey occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liable) unc	der or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any i	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or administ	trative proceeding under any env	ironr	mental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Pai	t 11: Give Details About Your Business or Conn	ections to Any Business			
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have ar	າy of	the following connections to any	/ business?
	☐ A sole proprietor or self-employed in a tr	ade, profession, or other activity,	, eith	er full-time or part-time	
	☐ A member of a limited liability company ((LLC) or limited liability partnersh	ıip (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing executi	ve of a corporation			
	☐ An owner of at least 5% of the voting or	-			

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. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person

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				1
Fill in this inform	nation to identify your case	: :		
Debtor 1	Susan B. Ferri			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the: DI	STRICT OF RHO	DDE ISLAND	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
Statemen	nt of Intention	for Indiv	iduals Filing Under Chapto	er 7 12/15
lf in all:	oideal filian en dan abantan	7	and their forms if	
	vidual filing under chapter claims secured by your p		out this form it:	
_	ed personal property and t	,	ot expired.	
You must file this	s form with the court within ver is earlier, unless the co	n 30 days after y	you file your bankruptcy petition or by the date s time for cause. You must also send copies to the	
	ople are filing together in a	a joint case, bot	h are equally responsible for supplying correct i	nformation. Both debtors must
	and accurate as possible. It		needed, attach a separate sheet to this form. On	the top of any additional pages,
		,		
Part 1: List Yo	our Creditors Who Have Se	cured Claims		
1. For any creditor information be		of Schedule D:	Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
	editor and the property that i	s collateral	What do you intend to do with the property tha secures a debt?	t Did you claim the property as exempt on Schedule C?
			secures a dept.	as exempt on schedule C:
Our ditaula 186	talla Fanna Illania Manta			
Creditor's W name:	ells Fargo Home Morta	ge	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
		_	☐ Retain the property and enter into a	■ Yes
	674 East Washington North Attleboro, MA 0		Reaffirmation Agreement.	
property securing debt:	Bristol County	2700	Retain the property and [explain]: Debtor's spouse will continue to make	
Scouring debt.			regular monthly payments.	
Part 2: List Yo	our Unexpired Personal Pro	anorty Losene		
For any unexpire	d personal property lease	that you listed i	n Schedule G: Executory Contracts and Unexpir	
			expired leases are leases that are still in effect; the the trustee does not assume it. 11 U.S.C. § 365(p)	
			ş ",	•
Describe your ui	nexpired personal property	y leases		Will the lease be assumed?
Lessor's name:	and			□ No
Description of lea Property:	sea			☐ Yes
				00
Lessor's name: Description of lea	has			□ No
Property:	ocu .			☐ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Deb	tor 1	Susan B. Ferri		Case number (if known)
	sor's na			□ No
	criptior perty:	n of leased		☐ Yes
	sor's na			□ No
	criptior perty:	n of leased		☐ Yes
	sor's na	ame: n of leased		□ No
	perty:	101100000		☐ Yes
	sor's na			□ No
	criptior perty:	n of leased		☐ Yes
	sor's na			□ No
	criptior perty:	n of leased		☐ Yes
Part	3:	Sign Below		
		alty of perjury, I declard at is subject to an une	e that I have indicated my intention about any property xpired lease.	y of my estate that secures a debt and any personal
X		usan B. Ferri	X	
		n B. Ferri ture of Debtor 1	Signature of E	Debtor 2
	Date	June 27, 2017	Date	

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Fill in t	his information to identify your case:		Ch	eck one	box only as d	irected in this form an	d in Form
Debto	Susan B. Ferri		12:	2A-1Su	pp:		
Debto	2			■ 1 Tk	oro io no propi	umption of abuse	
(Spouse	, if filing)			_	·	·	
United	States Bankruptcy Court for the: District of Rhode I	sland				o determine if a presu nade under <i>Chapter</i> 7	•
Case	number					cial Form 122A-2).	7001
(if knowr						does not apply now by service but it could a	
				☐ Che	eck if this is a	n amended filing	
Offic	cial Form 122A - 1						
Cha	pter 7 Statement of Your Cui	rent Mor	nthly Inc	ome	•		12/15
attach a case nu	omplete and accurate as possible. If two married people is separate sheet to this form. Include the line number to with mber (if known). If you believe that you are exempted from military service, complete and file Statement of Exemple: Calculate Your Current Monthly Income	vhich the additior m a presumption	nal information a of abuse becau	applies. Ise you d	On the top of ar	ny additional pages, wri narily consumer debts o	te your name and or because of
1. V	What is your marital and filing status? Check one or	 าly.					
	Not married. Fill out Column A, lines 2-11.						
	☐ Married and your spouse is filing with you. Fill o	ut both Columns	A and B, lines	2-11.			
•	Married and your spouse is NOT filing with you.	You and your s	spouse are:				
	☐ Living in the same household and are not lega	ally separated.	Fill out both Co	lumns A	A and B, lines 2	2-11.	
	Living separately or are legally separated. Fill	out Column A, li	nes 2-11; do no	ot fill out	Column B. By	checking this box, yo	u declare under
	penalty of perjury that you and your spouse are l living apart for reasons that do not include evading	egally separated	d under nonban	kruptcy	law that applie	es or that you and you	
101(the 6	in the average monthly income that you received from all 10A). For example, if you are filing on September 15, the 6-m 6 months, add the income for all 6 months and divide the tota uses own the same rental property, put the income from that p	nonth period would I by 6. Fill in the re	be March 1 thro	ugh Augı de any in	ust 31. If the amo	ount of your monthly incorpore than once. For examp	ne varied during ble, if both
				Colum Debto		Column B Debtor 2 or non-filing spouse	
	our gross wages, salary, tips, bonuses, overtime, ayroll deductions).	and commission	ons (before all	\$	2,998.42	\$	
	limony and maintenance payments. Do not include column B is filled in.	payments from	a spouse if	\$	0.00	\$	
o fr a	Ill amounts from any source which are regularly pour fyou or your dependents, including child support om an unmarried partner, members of your household not roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	Include regular d, your depende	r contributions nts, parents,	\$	1,300.00	\$	
5. N	let income from operating a business, profession,						
			otor 1				
	Gross receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
	Ordinary and necessary operating expenses		Copy here ->	Φ.	0.00	\$	
	let monthly income from a business, profession, or far	m \$	Copy liele ->	φ	0.00	Ψ	
6. N	let income from rental and other real property	Deb	otor 1				
(-	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	let monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
7. l r	nterest, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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Susan B. Ferri Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$	•	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a benef	it under	·		·		
		0.0	00					
	For you \$ For your spouse \$							
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act.	ount received that was	s a	\$	0.00	\$		
10.	Income from all other sources not listed above. Spec Do not include any benefits received under the Social Streceived as a victim of a war crime, a crime against hum domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or paymen nanity, or international separate page and pu	ts or	\$	0.00	\$		
	•			\$	0.00	\$		
	Total amounts from congrete pages, if any		— .	φ		φ		
	Total amounts from separate pages, if any.			»	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		\$	4,298.42	+ \$ _		= \$	4,298.42
							Total c	urrent monthly
Part	2: Determine Whether the Means Test Applies to	You						
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		Сору	line 11 h	nere=>	\$	4,298.42
	Multiply by 12 (the number of months in a year)						x 1	
	12b. The result is your annual income for this part of the	form				12b.	\$\$	51,581.04
13.	Calculate the median family income that applies to y	ou. Follow these step	os:					
	Fill in the state in which you live.	RI						
	Fill in the number of people in your household.	3						
	Fill in the median family income for your state and size of					13.	\$7	77,079.00
	To find a list of applicable median income amounts, go of for this form. This list may also be available at the bankr		pecified	in the separat	te instruc	tions		
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Or Go to Part 3.	the top of page 1, ch	eck box	1, There is n	o presum	ption of abuse).	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	page 1, check box 2,	The pre	esumption of a	abuse is (determined by	Form 12	22A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information or	n this sta	atement and in	n any atta	chments is tru	ie and co	orrect.
	χ /s/ Susan B. Ferri							
	Susan B. Ferri Signature of Debtor 1							
	Date June 27, 2017 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form	122A-2.						
	If you checked line 14b, fill out Form 122A-2 and fil	e it with this form.						

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	5	filing fee	_
\$75	5	administrative fee	
+ \$1	5	trustee surcharge	
\$33	5	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 1:17-bk-11081 Doc 1 Filed 06/27/17 Entered 06/27/17 15:26:17 Desc Main Document Page 50 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Rhode Island

In re	e Susan B. Ferri		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COM	PENSATION OF ATTORN	NEY FOR DE	CBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplat	filing of the petition in bankruptcy, or	agreed to be paid	to me, for services re	
	For legal services, I have agreed to accept		\$	500.00	
	Prior to the filing of this statement I have receive	ved	\$	500.00	
	Balance Due		\$	0.00	
2.	\$335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed c	compensation with any other person un	less they are mem	pers and associates of	f my law firm.
	☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the				aw firm. A
6.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspects of	of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and r b. Preparation and filing of any petition, schedules, c. Representation of the debtor at the meeting of cr d. [Other provisions as needed] Exemption planning; review of reaffice 	statement of affairs and plan which meditors and confirmation hearing, and	nay be required; any adjourned hea	rings thereof;	ruptcy;
7.	By agreement with the debtor(s), the above-disclose Representation of the debtors in any any other adversary proceeding. The	/ dischargeability actions, judicia	al lien avoidance	es, relief from stag st bankruptcy aud	/ actions or lit.
		CERTIFICATION			
	I certify that the foregoing is a complete statement obankruptcy proceeding.	of any agreement or arrangement for pa	ayment to me for re	epresentation of the d	lebtor(s) in
J	June 27, 2017	/s/ Christopher M. L	_efebvre, Esq.		
_	Date	Christopher M. Lefe	ebvre, Esq.		
		Signature of Attorney Law Offices of Chri	stopher M. Lefe	bvre	
		P.O. Box 479			
		Pawtucket, RI 0286 (401) 728-6060 Fax		ļ	
		chris@lefebvrelaw.			
		Name of law firm			

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United States Bankruptcy Court District of Rhode Island

		District of Knowe Island		
In re	Susan B. Ferri		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR N	MATRIX	
ne ab	ove-named Debtor hereby verific	es that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
Date:	June 27, 2017	/s/ Susan B. Ferri		
		Susan R Forri		

Signature of Debtor

PO Box 1022 Wixom MI 48393-1022

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Anthony P. Ferri 674 East Washington Street PO Box 10368
North Attleboro MA 02760 Des Moines IA 50306-0368

Wells Fargo Home Mortage

Capital One, N.A. PO Box 30285 Salt Lake City UT 84130-0285

Chase Card Services PO Box 15298 Wilmington DE 19850

Comenity-Loft Bankruptcy Department PO Box 182125 Columbus OH 43218-2125

Comenity-Victoria's Secret Bankruptcy Department PO Box 182125 Columbus OH 43218

Discover Customer Service PO Box 30943 Salt Lake City UT 84130

IRS PO Box 24017 Fresno CA 93779-4017

Men's Wearhouse/Syncb PO Box 965004 Orlando FL 32896

Target Credit Services PO Box 1581 Minneapolis MN 55440